PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10/532319

(Column 1) (Column 2)								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS				11	(COIU	(Column 2)		TYPE		OR	SMALL	
			4	>				RATE	FEE	1	RATE	FEE
FC			NUMBER	FILED	NUMB	ER EXTRA		BASIC FEE	\$375	OR	BASIC FEE	\$750
TOTAL CHARGEABLE CLAIMS					* -	*		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =					X42=		OR	X84=	
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	L	TOTAL	 	OR	TOTAL	
	C	LAIMS AS A	MENDED - PART II							₫.¨	OTHER	THAN
		(Column 1)		(Colum	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	i	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AINA	- -		X42≐		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	•
		(Column 1)		DVII. FEE	l		MUDII. FELS					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGHI NUME PREVIO PAID F	EST BER DUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
لــــــــــــــــــــــــــــــــــــــ	FIRST PRESE	NTATION OF ML	JLTIPLE DEP	ENDENT	CLAIM			+140=		OR	+280=	
•	• .			•		-7	L	TOTAL		L	TOTAL	
		•					Al	DDIT. FEE		OR ,	ADDIT. FEE	
		(Column 1) CLAIMS		(Colum		(Column 3)	· _			_		
AMENDMENT C	《 图》(1885年)	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus .	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┢					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	· · · · · · · · · · · · · · · · · · ·
44 H	f the "Highest Nur	mber Previously Pa	ld For" IN THIS	S SPACE is	less than	20. enter "20."	AD	TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE	
7	he "Highest Num	mber Previously Pa ber Previously Paid	iu For (Total or	Independe	nt) is the i	i 3, enter 3. highest number		•	ropriate box	in colu	ımn 1.	